

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10-599,217

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		2				
4	(1)					
5	(1)					
6	(1)					
7	(1)					
8	(1)					
9	(1)					
10	(1)					
11	(1)					
12	1					
13	(1)					
14	(1)					
15	(1)					
16	(1)					
17	1					
18	2					
19	1					
20	1					
21	1					
22	1					
23	(1)					
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50						
TOTAL IND.	1	↓		↓		↓
TOTAL DEP.	24	←		←		←
TOTAL CLAIMS	25	QR	QR	QR	QR	QR

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.			↓		↓	
TOTAL DEP.		←		←		←
TOTAL CLAIMS		QR	QR	QR	QR	QR